U7870-1.8:A
Med 7/18/80

NASIS

NEBRASKANS AND THEIR
MENTAL HEALTH

UNL

NEBRASKA ANNUAL SOCIAL INDICATORS SURVEY

Bureau of Sociological Research
Department of Sociology
University of Nebraska–Lincoln
Lincoln, Nebraska 68588
Telephone: (402) 472-3672

BEST AVAILABLE COPY

NASIS-79 #8

NEBRASKANS AND THEIR MENTAL HEALTH

Peter G. Beeson
Nebraska Department of Health

and

Alan Booth
Department of Sociology

Price: $1.00

The Nebraska Annual Social Indicators Survey

Lynn K. White: 1979 Study Director

The findings in this report are based on data collected in the third Nebraska Annual Social Indicators Survey (NASIS). This survey is part of an on-going study of the quality of life in Nebraska conducted by the Bureau of Sociological Research at the University of Nebraska-Lincoln.

In 1979 a representative sample of 1882 Nebraskans eighteen years of age or older living in households was interviewed by telephone. The respondents to the 1979 survey are part of a panel originally selected and interviewed in 1977 and 1978. They will be re-interviewed every two years in order to provide information on changing quality of life. The interviews averaged approximately 40 minutes and included questions about environment, health, crime, political attitudes, occupation, education, family life and other matters reflecting the quality of life experienced in the state. For the entire sample, 95 out of 100 times the percentages computed from the items asked on the survey are likely to be accurate to within plus or minus 2.3 percent of the figure that would have been obtained if each adult in Nebraska had been surveyed. This is an estimate of maximum error and for most items the percentages are likely to be even more accurate.

The data gathered by NASIS are used by a wide variety of State and local government agencies for policy and program planning and by faculty and students at the University of Nebraska and other colleges for research. No information identifying any respondent is released to any users and the strict confidentiality of individual respondents is rigidly enforced. While the final responsibility for the organization and structure of the survey and for reports produced under its name rests with the Bureau of Sociological Research, public agencies and University departments play an integral part in planning the survey through an Advisory Committee. Public organizations interested in membership on the Advisory Committee should contact the NASIS Study Director.

Funding for NASIS comes from the University of Nebraska, The Bureau of Sociological Research, and State and local agencies which buy items and data analysis from the survey.

The NASIS surveys are repeated each year to measure changes in the quality of life in Nebraska. While there is a core of questions which is included every year, each survey has a large component of unique items which address specific topical issues. Plans for future years include interviewing a new sample of Nebraskans in 1980 as well as continuing to re-interview the 1977 panel every two years to assess changes in their lives. Additional detail on the NASIS surveys regarding use of the survey data or cost of purchasing items on future surveys can be obtained by contacting Lynn K. White, NASIS Study Director, at the Bureau of Sociological Research or by sending for a copy of the 1980 NASIS Prospectus.

The University of Nebraska-Lincoln, an Affirmative Action/Equal Opportunity Employer, supports equal educational opportunity and offers the information listed herein without regard to age, sex, race, handicap, national origin, marital status, veterans status, or religion.

NEBRASKANS AND THEIR MENTAL HEALTH

One of the concerns investigated by the 1979 Nebraska Annual Social Indicators Survey (NASIS) was the general level of mental health among Nebraskans. Two questions were employed to gauge the experience of mental health problems and the extent to which these kinds of problems affect the lives of Nebraskans. The first question, "Have you ever felt you were going to have a nervous breakdown?" is designed to indicate the number of Nebraskans who experience mental health problems. Epidemologic research has established this question as one of the most predictive questions for estimating mental health problems. The second question, "In the past year, did you cut down on your activities because you were extremely unhappy, nervous, irritable, or depressed?" seeks to determine disability associated with the symptoms of mental health problems.[1]

Sixteen percent of respondents reported having felt they were going to have a nervous breakdown. As an indication of the level of mental health problems in Nebraska, this is remarkably close to the figure (fifteen percent) given by the President's Commission on Mental Health (1978) as the proportion of the population in need of mental health services. This question has been included in NASIS surveys since 1977 and the percent of respondents indicating having had this experience remains consistent at around fifteen percent. In 1957, a national survey using this question found that nineteen percent of the sample said they had exper-

---

1. It is unlikely that persons with severe mental disorder are among the respondents in this survey. The severely mentally disabled often live in institutions, nursing homes, board and room houses, and like residences; many are highly transient; they are unlikely to have telephones; and, if a member of a household in the samples, unlikely to be the one interviewed. Therefore, the results of this survey should be viewed as pertaining only to persons experiencing mild to moderate mental health problems.

ienced the feeling of going to have a nervous breakdown and in 1976 that figure rose to twenty-one percent.[2] It would appear that in Nebraska either the overall level of mental health has changed since 1975 or that Nebraskans, compared to the rest of the country, are less likely to report the experience of mental health problems, or are actually healthier mentally.

Seven percent of the respondents reported that their experience of symptoms (nervousness, depression, irritability, etc.) of mental health problems had at sometime during the past year caused them to reduce their usual activities. While seven percent may seem small, projections based on recent population estimates (Bureau of Business Research) indicate that the actual number of Nebraskans affected in this manner last year was in excess of 76,000.[3]

To obtain an idea of whether some people are more likely to experience mental problems than others, we examined the responses to our two basic questions for people in different categories (See Table 3). Women were much more likely to report mental distress than men. And, there was a tendency for the extremes of the age categories (young adult and elderly) to report less mental distress than the middle category (35-59 yrs.). When family types were compared, it was evident that married couples with children who had other relatives (such as an elderly parent) living with them, were more likely to experience mental health problems than couples alone or couples with children. Single parents living with their children were most likely to have mental health problems. Over one-fourth of these reported having the experience of a possible nervous breakdown and one-fifth reported some degree of disability due to symptoms of mental health problems dur-

---

2. Joseph Veroff, "General Feelings of Well Being Over a Generation: 1957-1976". Paper presented at the American Psychological Association Meetings, Toronto, 1978.

3. These two basic mental health items are highly interrelated as can be seen from Table 2.

ing the past twelve months. While raising a child single-handed is, no doubt the source of some stress, the recent loss of a spouse through divorce or death could also account for some of the distress. An examination of people living alone did not reveal that they had greater mental problems than married individuals with children. The individuals showing the fewest mental health problems were married people without children.

Those employed full-time seemed to be especially free of mental health problems while those who were unemployed and looking for work were nearly three times as likely to report such problems. Retired persons seemed to be relatively free of mental health problems, while those keeping house and those working part-time made up the middle range.

To gain some idea as to the role of personal finances in causing mental anguish we asked: "What about your financial prospects? Do you feel that you're better off this year than you were two years ago at this time, about the same, or worse off?" Those indicating they were worse off were more likely to report experiencing the possibility of a nervous breakdown and twice as likely to have felt the impact of mental health problems on their daily activities.

Those with less than a high school education were more likely to report mental health problems than high school graduates. Those with training beyond high school were the least likely to have such problems. Perhaps the advanced training gives them more skills to cope with distressing situations.

Contrary to common assumptions there was no apparent difference between rural and urban residents in the tendency to report mental health problems. Those living on farms were least likely to report mental health problems while rural nonfarm residents were higher than all but one of the urban categories. Of the urban categories, Lincoln stood out from the rest in likelihood of having persons report

the experience of mental health problems.

These findings generally conform to previous research which consistently shows a strong relationship between mental health problems and various social and demographic factors. From previous research and national policy certain categories of people are assumed to be more "at risk" for the development of mental health problems than the general population. These data support the assumptions which indicate a high risk for women, single parents, the unemployed, those financially bad off, and those with low educational attainment. However, the data do not support the assumptions that the elderly and those living in urban environments are at greater risk than the general population.

Recently there has has been a great deal of discussion about the interrelationship between physical and mental well being. We decided to look at this by comparing the responses to our two mental health items with reports of other medical problems and the use of medical services. The data presented in Table 4 indicate that in all cases those experiencing physical health problems and those most involved in the use of medical services were more likely to report experiencing mental health problems. People who reported they were sick within the last two weeks were also more likely to report mental health problems. Similarly, individuals reporting an illness that had lasted more than three months or who had some condition that limited their ability to carry out routine tasks were more apt to report mental health problems. This tendency is extended to the data on receiving treatment as well. Individuals who had seen a physician several times within the past year or who had been admitted to a hospital during that period were also apt to give affirmative responses to the mental health items during the interview. The medical problems reflected in the responses to these items may be a source of anxiety or depression. On the other hand, the mental distress may be at the root

of other medical problems or of seeking medical care. The President's Commission on Mental Health reports that over half of those persons being treated for mental disorders receive that treatment through primary care medical services.

A common assumption is that mental health is directly related to happiness and satisfaction. In order to examine this we compared our two mental health items with the respondents feelings about personal and marital happiness and satisfaction with their job and leisure activities (See Table 5). The vast majority of respondents indicate a general level of personal happiness; are happy with their marriage; and indicate they are satisfied with their work and leisure activities. However, those expressing low happiness and dissatisfaction are more likely to report the nervous breakdown experience and to indicate having cut down on their activities in the past year due to extreme unhappiness, nervousness, irritability, or depression. For example, only ten percent of those who said they were very happy indicated that they had felt like they were going to have a nervous breakdown compared with fifty-three percent of the people who said they were not too happy. These findings show a relationship between mental health and happiness/satisfaction but it is not clear whether mental health problems come first or follow low happiness and dissatisfaction. Finally, it is important to recognize that there is not a one-to-one relationship between the mental health items and the happiness-satisfaction items; some people who say they are very happy and satisfied also report mental health problems and some persons who say they are not too happy and dissatisfied do not report mental health problems.

Our final concern was the relationship between the experience of mental health problems and seeking help. We have already established a relationship between the experience of mental health problems and seeking medical care. All survey respondents were asked: "During the past year, did you seek advice or help with any per-

sonal problem?" Ten percent of the sample indicated they had done so. Comparisons of the experience of mental health problems and seeking help for a personal problem (see Table 6) reveals that those experiencing mental health problems were more likely to have sought advice or help with personal problems. However, less than half of those having had the experience of feeling like they were going to have a nervous breakdown and less than one-third of those cutting down on activities due to the experience of symptoms of mental health problems, sought advice or help during the previous year. Persons reporting ever feeling like they were going to have a nervous breakdown were more likely to have sought help or advice than those reporting a reduction in activities due to the experience of symptoms of mental health problems. Table 7 indicates that, of the ten percent who sought help, thirty-one percent sought it from family or friends; thirty percent from a mental health professional or agency; thirteen percent from a doctor; ten percent from clergy; and sixteen percent consulted more than one source. Those who reported experiencing mental health problems were slightly less likely to have sought help from family or friends and significantly less likely to have sought help from clergy. Of those seeking help, respondents reporting on experience of possible nervous breakdown were most likely to seek help from a mental health professional or agency (forty percent) while those respondents reporting impaired activity due to the experience of symptoms of mental health problems were twice as likely as others to seek help or advice from a doctor.

In sum, the NASIS' indicators show approximately fifteen percent of Nebraskans experiencing mental health problems and around one-half that figure reporting that symptoms of mental health problems effected their lives during the year prior to the interview. In all likelihood these figures do not represent those Nebraskans with serious mental disorder which, according to the President's Commission on Mental Health (1978) estimates, could be as high as three percent of the population. The

characteristics of single parenthood, unemployment, lowered financial prospects, and low educational attainment were associated with experiencing mental health problems. Surprisingly, there were not significant rural-urban differences. Experience of mental health problems was associated with the experience of physical health problems and seeking medical care. Low personal or marital happiness and dissatisfaction with work or spare time activities was associated with the experience of mental health problems. Those reporting the experience of mental health problems were more likely than others to have sought help or advice for personal problems during the year prior to being interviewed. The data on seeking help shows Nebraskans to be very self-reliant group. In many ways Nebraskans seem to follow the same patterns as the rest of the country but there is some evidence that in certain instances they are different and that they may be slightly better off in terms of the experience of mental health problems.

TABLE 1

Percent reporting mental health problems.

	Yes	N
Have you ever felt you were going to have a nervous breakdown?	16%	1870
In the past year, did you cut down on your activities because you were extremely unhappy, nervous, irritable, or depressed:	7%	1870

TABLE 2

Comparison or responses to Basic Mental Health Questions

		Have you ever felt like you were going to have a nervous breakdown:		
		Yes	No	N
In the past year, did you cut down on your activities because you were extremely unhappy, nervous, irritable, or depressed?	Yes___	27%	3.6	135
	No ___	73%	96.4	1734

TABLE 3

Percent reporting impaired mental health by selected characteristics.

	Percent Reporting Ever Felt Like Going to Have a Nervous Breakdown	Percent reporting Cutting Down on Activities Because They Were Extremely Unhappy, Nervous, Irritable, or Depressed	N
Sex			
Men	11	5	897
Women	19	9	974
Age			
18-34	15	9	741
35-59	18	6	676
60+	13	6	454
Household Type			
Married couple alone	12	5	529
Married couple with dependent children	16	7	904
Married couple with dependent children and other relatives	20	17	42
Single Parent with dependent children	26	20	61
One person household	16	8	192
Group of non-relatives living together	13	7	64
Other	19	14	80
Employment			
Working full-time	13	6	924
Working part-time	19	8	242
Unemployed - looking for work	28	15	29
Retired	11	8	207
Keeping House	20	9	396
Other	11	9	73
Financial Prospects			
Better or same as two years ago	14	6	1494
Worse than two years ago	20	12	365
Education			
Less than high school graduate	17	11	347
High school graduate	18	8	763
Post high school training	13	5	757
Residence			
Omaha	15	7	437
Lincoln	20	11	200
Other Urban	15	6	532
Rural non-farm	18	8	395
Rural farm	12	7	307

TABLE 4

Percent reporting mental health problems and other health problems.

	Percent Reporting Ever Felt Like Going to Have a Nervous Breakdown	Percent Reporting Cutting Down on Activities Because They Were Extremely Unhappy, Nervous, Irritable, or Depressed	N
Were there any days during the past two weeks that you cut down on your activities because you were sick?			
No	14	6	1491
Yes	20	14	380
Do you have any health problems or illness that you have had for more than three months, since March, 1978?			
No	13	6	1402
Yes	24	11	468
Do you have any health or physical condition that limits you in dressing, bathing, eating, working, or keeping house?			
No	15	6	1695
Yes	24	16	175
How many times have you seen a physician in his office or clinic in the last 12 months?			
0	8	3	511
1-2	18	7	744
3-9	23	11	449
10 or more	29	16	151
Were you admitted to a hospital during the past year?			
No	14	6	1568
Yes	25	13	304

TABLE 5

Percent reporting mental health problems related to reports of happiness and satisfaction.

	Percent Reporting Ever Felt Like Going to Have a Nervous Breadkown	Percent Reporting Cutting Down on Activities Because They Were Extremely Unhappy, Nervous, Irritable, or Depressed	N
Taking all things together, how would you say you are these days? Would you say you are very happy, pretty happy, or not too happy?			
Very Happy	10%	4%	774
Pretty Happy	17%	8%	1016
Not Too Happy	53%	39%	78
Taking all things together, how would you describe your marriage? Would you say that your marriage is very happy, pretty happy, or not too happy?			
Very Happy	12%	4%	885
Pretty Happy	20%	10%	484
Not Too Happy	55%	34%	13
On the whole, how satisfied are you with the work you do -- would you say you are very satisfied, moderately satisfied, a little dissatisfied, or very dissatisfied?			
Satisfied	14%	6%	1045
Dissatisfied	18%	12%	118
How satisfied are you with the way you spend your spare time? Would you say you are very satisfied, satisfied, dissatisfied, very dissatisfied, or neither satisfied nor dissatisfied?			
Satisfied	14%	6%	1596
Neither Satisfied or Dissatisfied	18%	11%	119
Dissatisfied	33%	22%	154

TABLE 6

Comparisons of reporting mental health problems to seeking help or advice with personal problems.

		Percent Reproting Ever Felt Like Going to Have a Nervous Breakdown?	Percent Reporting Cutting Down on Activities Because They Were Extremely Unhappy, Nervous, Irritable, or Depressed	N
"In the past year, did you seek advice or help with any personal problems?	YES	46%	31%	179
	NO	12%	5%	1685

TABLE 7

For those who sought advice for a personal problem in the past; responses to question: "Where did you receive your advice or help?"

	All Respondents %(N)	Respondents Reporting An Experience of Possible Nervous Breakdown %(N)	Respondents reporting Impaired Activity Due to The Experience Of Symptoms of Mental Health Problems %(N)
Family or Friends	31 (55)	24 (20)	21 (12)
Clergy	10 (18)	5 (4)	2 (1)
Doctor	13 (22)	13 (11)	26 (14)
Mental Health Professional or Agency	30 (53)	40 (33)	32 (17)
Used more than one Source	16 (29)	18 (15)	19 (11)
	100%	100%	100%

List of reports already released using data gathered in the 1979 Nebraska Annual Social Indicators Survey. These may be purchased at the indicated price from the Bureau of Sociological Research of the University of Nebraska-Lincoln.

Report Number	Title
1	Designs, Procedures, Instruments, and Forms for the 1979 NASIS. Lynn K. White. Price: $7.50.
2	Taxes: Are They Fair? Susan Welch and Alan Booth. Price: $ .50.
3	Nebraska's Children -- Learning to Work. Lynn K. White and David B. Brinkerhoff. Price: $ .75.
4	Nebraskans' Evaluations of their State Government. Alan Booth and Susan Welch. Price: $ .50.
5	Nebraskans and State Water Policy: Part I. Susan Welch and Gordon Kissel. Price: $ .50.
6	Energy: Voluntary Household Conservation in Nebraska. Lynn K. White and Nikolai Rudakov. Price: $1.00.
7	Nebraskans and State Water Policy: Part II. Susan Welch and Gordon Kissel. Price: $ .50.